

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	L E L I Z A		04/26/01
O.I.P.E. CLASSIFIER	S	30350	SP/ 06/12/01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

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## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
1	03/26/01
2	✓
3	0
4	0
5	0
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	0
13	0
14	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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1606-13-01